


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F96000004766 (9) 1. Corporation Name THE CLUB AT CHARTER POINT CORPORATION OF GEORGIA					
Principal Place of Business 1819 PEACHTREE ST NE, SUITE 520 ATLANTA GA 30309			Mailing Address 1819 PEACHTREE ST NE, SUITE 520 ATLANTA GA 30309		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		09/17/1996	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		APPLIED FOR 75-2669199	
24 Country		29 Country		Applied For	
				Not Applicable	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		5. Certificate of Status Desired	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		81 Name		<input type="checkbox"/> \$8.75 Additional Fee Required	
		82 Street Address (P.O. Box Number is Not Acceptable)		<input type="checkbox"/> \$5.00 May Be Added to Fees	
		83		6. Election Campaign Financing	
		84 City		Trust Fund Contribution	
		FL 85 Zip Code		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE _____ DATE _____ (Signature typed or printed name of registered agent and title, if applicable) (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS					
TITLE	C	<input type="checkbox"/> DELETE	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
NAME	CASSILS, JOHN G		11 TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	650 W. GEORGIA ST, SUITE 2160		12 NAME	SAUNDERS, ROD G.	
CITY-ST-ZIP	VANCOUVER BC, CANADA V6B 4N7		13 STREET ADDRESS	650 W. GEORGIA ST., SUITE 2160	
TITLE	VCVS	<input type="checkbox"/> DELETE	14 CITY-ST-ZIP	VANCOUVER BC, CANADA V6B 4N7	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHNSTON, JAMES A		21 TITLE		
STREET ADDRESS	650 W. GEORGIA ST, SUITE 2160		22 NAME		
CITY-ST-ZIP	VANCOUVER BC, CANADA V6B 4N7		23 STREET ADDRESS		
TITLE	PD	<input type="checkbox"/> DELETE	24 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MACKAY, JOHN D.L.		31 TITLE		
STREET ADDRESS	650 W. GEORGIA ST, SUITE 2160		32 NAME		
CITY-ST-ZIP	VANCOUVER BC, CANADA V6B 4N7		33 STREET ADDRESS		
TITLE	AS	<input type="checkbox"/> DELETE	34 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOMAS, SAM E		41 TITLE		
STREET ADDRESS	1819 PEACHTREE ST NE, SUITE 520		42 NAME		
CITY-ST-ZIP	ATLANTA GA 30309		43 STREET ADDRESS		
TITLE		<input type="checkbox"/> DELETE	44 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			51 TITLE		
STREET ADDRESS			52 NAME		
CITY-ST-ZIP			53 STREET ADDRESS		
TITLE		<input type="checkbox"/> DELETE	54 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			61 TITLE		
STREET ADDRESS			62 NAME		
CITY-ST-ZIP			63 STREET ADDRESS		
			64 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition



DO NOT WRITE IN THIS SPACE

SIGNATURE:

Rod G. Saunders

12-Jan-98

(604) 687-1919

CR2E034 (10/97)